

GERMANTOWN CHARITY HORSE SHOW
 June 6-10, 2017—entries received by 1:00 p.m. on the day
 of the class will receive a \$10 per class discount!

NON-USEF ENTRY BLANK

MAIL ENTRIES TO:
 GCHS
 220 Farrar Rd
 Shelbyville, TN 37160
 615-604-4616 cell—615-346-0290 work
 GCHSmanager@gmail.com

OFFICE USE	NAME OF HORSE	REG #	YR FOALED	SEX	BREED	HEIGHT	COLOR	
	RIDER/DRIVER/HANDLER		CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$
	RIDER/DRIVER/HANDLER		CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
				FEE	FEE	FEE	FEE	FEE

I hereby enter the above horses and riders at my own risk and subject to the rules and regulations of the Show. I further agree that if any damage is occasioned or loss occurs to the horses exhibited, to any vehicle or other articles which I may send with said horses, I will make no claim therefore against the Germantown Charity Horse Show or any participating organizations. SIGNATURE _____

OWNER NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

CELL PHONE _____

EMAIL _____

TRAINER NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

CELL PHONE _____

EMAIL _____

RIDER 1 _____

ADDRESS _____

CITY/STATE/ZIP _____

EMAIL _____

RIDER 2 _____

ADDRESS _____

CITY/STATE/ZIP _____

EMAIL _____

PRIZE MONEY TO BE PAID TO:

Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone _____

SSN or Tax ID _____

TOTAL CLASS FEES

_____ Horse & Tack Stalls @ \$140 _____

On or before May 5

_____ Horse & Tack Stalls @ \$200 _____

After May 5

_____ Grounds Fee (no stall) @ \$15/day _____

_____ Non-Showing Horse @ \$135 _____

_____ Office Fee @ \$20 per horse _____

_____ RV Hookup @ \$250 _____

_____ Box Seats @ \$250 _____

TOTAL FEES _____

PAYMENT METHOD

Check Credit Card

Acct # _____

Exp Date _____

Sec. Code _____

Signature of cardholder _____

EMERGENCY CONTACT #

STABLE WITH